Virginia Office of EMS Data Element Dictionary Format

Technical Manual Format

Each data element is presented using the following template (see below). The Evaluation Committee considered it important to provide sufficient detail about each data element to justify its inclusion in the minimum data set, as well as to assist agencies seeking to implement their own data collection system. In order to provide definitions that would be consistent with nationwide data collection systems, the Evaluation Committee selected Virginia's data elements from various sources including the Uniform EMS Data Element Dictionary, the Utstein Style of data reporting, the Virginia Trauma Registry and the Virginia Trauma Triage Protocols. The Virginia minimum data set closely follows the national data set; however, there are several modifications due to Virginia's reporting needs. When a data element requires specific categories, these are listed in the data item specification ("Data Items"). The Committee recognizes that the lists included in this dictionary are imperfect, but definitions of these lists have been debated for many years without resolution. The lists included here are intended as a starting point for a uniform EMS data set that will evolve.

The dictionary format for each data element is as follows:

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Name of Data Element:	Name
Priority:	Essential or Desirable[1]
Definition:	Short definition of data element
Code:	Coded description of data element values or attributes
Field Length:	Length of data element
Field Starting and Ending Position:	Specifies position of data element in ASCII fixed length file
Data Items:	Alternative descriptions of data element values or attributes

Content: Detailed discussion of definition and content.

Technical Comments: Additional information that may be of use to individuals developing a data collection system.

Revised: August 1, 2001

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[1]Essential or Desirable Priority - Those elements that indicate an "essential" priority must be included in the data reported to the Office of EMS. If an element indicates a "desirable" priority, reporting of this information is optional. "Desirable" elements are recognized as information that is useful but due to limitations often found with an agency's ability to collect this information, it may not be feasible for all agencies to capture and report these elements.

Virginia Office of EMS Data Element Dictionary

This document makes reference to ICD-9 codes and E849 place of occurrence codes. ICD-9 is an acronym for International Classification of Diseases, 9th Revision. ICD-9 is a system of codes designed to classify diseases and injuries for statistical purposes. While the codes themselves are not used, the categories under some of the data elements are based on the ICD-9 code groupings. E849 place of occurrence codes are specific ICD-9 codes used to identify the external cause of injury, poisoning, or other adverse effects.

1.

Name of Data Element:	Agency Number
Priority:	Essential
Definition:	Number that identifies the agency responding to an incident
Code:	Numeric entry
Field Length:	5
Field Starting and Ending Position:	1 - 5

Content: The unique 5-position agency number that is assigned by the Office of EMS.

See Appendix D for a complete list of EMS agency numbers.

Technical Comments: This number must be unique to each agency. It can be used to construct reports that group data by agency number.

2.

Name of Data Element:	Jurisdiction Incident Number
Priority:	Essential
Definition:	Unique number for each incident reported to dispatch
Code:	Numeric or alpha/numeric entry
Field Length:	8
Field Starting and Ending Position:	6 - 13

Content: The unique 8-position number assigned by a local jurisdiction to each EMS related incident. Missing values should be coded in a consistent manner (zero fill if number is small e.g. 00001234).

Technical Comments: This number must be unique within an agency and then by combining it with a unique agency number, it will be possible to construct a unique identifying number for the incident. In some cases incident number, patient care number, or response number may be the same.

3.

Name of Data Element:	Incident Location City/Co. FIPS
Priority:	Essential
Definition:	City, town or county where patient was found or to which unit responded (or best approximation)
Code:	Numeric entry
Field Length:	5
Field Starting and Ending Position:	14 - 18

Data Items:
{5 digit FIPS code}
51124 Out of State
51999 Unknown

Content: This 5-position data element must be coded using the FIPS system, wherein each locality is encoded with a unique number. In Virginia, each FIPS number begins with '51' (i.e. Prince William County is coded as '51153'). City, town or county FIPS codes are only unique within a state.

See Appendix C for a complete list of VA City/Co FIPS codes.

Technical Comments:

　　　51124 O*ut of State*
This code should be used when the location of the incident is not within the boundaries of the Commonwealth of Virginia.

　　　51999 *Unknown*
This code should be used when the location of the incident is not known or when information cannot be accurately reconstructed from the run record.

4.

Name of Data Element:	Location Type
Priority:	Essential
Definition:	Type of location of incident
Code:	Numeric or alpha/numeric entry
Field Length:	2
Field Starting and Ending Position:	19 - 20

Data Items

01	Home / Residence	07	Public Building
02	Farm	08	Residential Institution
03	Mine or quarry	09	Educational Institution
04	Industrial place and premises	10	Other specified location
05	Place for recreation or sport	11	Unspecified location
06	Street or highway	88	Not Applicable
		99	Unknown

Content: The 2-position code that refers to the location where the injury occurred, <u>not</u> necessarily the origin of the transport. Location type data items are coded in terms of the (ICD-9) E849 place of occurrence codes with the exceptions that a category for educational institutions has been added, and an unknown category is provided. The "Unknown" category is provided so that inaccurate data is not entered into this field. Only **1 (one)** Location Type should be selected.

Technical Comments: The definitions below are from ICD-9, which is currently utilized.

01 *Home / Residence (E Code 849.0)*
Includes apartment, boarding house, farm house, home premises, residential house, non-institutional place of residence, private driveway, private garage, private garden, private home, private walkway, swimming pool within private house or garden, and yard of home. Excludes home under construction but not occupied, or institutional place of residence.

02 *Farm (E Code 849.1)*
Includes farm buildings and land under cultivation. Excludes farmhouse and home premises of farm.

03 *Mine or quarry (E Code 849.2)*
Includes gravel pit, sand pit, or tunnel under construction.

04 *Industrial place and premises (E Code 849.3)*
Includes building under construction, dockyard, dry dock, factory building or premises, garage (place of work), industrial yard, loading platform in factory or store, industrial plant, railway yard, shop (place of work), warehouse, and workhouse.

05 *Place for recreation or sport (E Code 849.4)*
Includes amusement park, baseball field, basketball court, beach resort, cricket ground, football field, golf course, gymnasium, hockey field, holiday camps, ice palace, lake resort, mountain resort, playgrounds including school playground, public parks, racecourses, resorts of all types, riding school, rifle range, seashore resorts, skating rink, sports ground, sports palace, stadium, public swimming pool, tennis court, vacation resort. Excludes occurrences in private house, private garden, private swimming pool, and private yard.

06 *Street or highway (E Code 849.5)*
Includes all public roadways.

07 *Public building (E Code 849.6)*
Includes any building used by the general public, including airport, bank, cafe, casino, church, cinema, clubhouse, courthouse, dance hall, parking garage, hotel, market, movie theater, music hall, nightclub, office, office building, opera house, post office, public hall, broadcasting station, restaurant, commercial shop, bus or railway station, store, or theater. Excludes home garage or industrial building or workplace. <u>Also excludes state, public, and private schools, which vary from the ICD-9 definition.</u>

08 *Residential institution (E Code 849.7)*
Includes children's home, dormitory, hospital, jail, home for elderly, orphanage, prison, and reform school.

09 *Educational institution*
Includes state, public and private schools. Excludes playground, gymnasium, and other recreational locations within educational institutions, which should be coded as place for recreation or sport.

10 *Other specified location (E Code 849.8)*
Includes beaches, canal, caravan site, derelict house, desert, dock, forest, harbor, hill, lake, mountain, parking lot, parking place, pond or natural pool, prairie, railway line, reservoir, river, sea, seashore, stream, swamp, trailer court, and woods. Excludes resorts.

11 *Unspecified location (E Code 849.9)*
Includes any location not included in the "Other" specified location classification.

88 *Not Applicable*
This code should be used when there is no patient.

99 *Unknown*
This code should be used when the location of incident is not known or when information cannot be accurately reconstructed from the run record.

5.

Name of Data Element:	Type of Service
Priority:	Essential
Definition:	Type of service requested
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	21 - 22
Data Items:	

<div align="center">

Data Items:

01   Scene
02   Unscheduled Interfacility Transfer
03   Scheduled Interfacility Transfer
04   Standby
05   Rendezvous
88   Not Applicable
99   Unknown

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Content: The 2-position code used to categorize the type of service that is required and to allow planning of EMS resource allocation. Only **1 (one)** Type of Service should be selected.

01 *Scene*
Refers to direct response to scene of incident or injury, such as roadway, etc. This location should be the location indicated in Data Elements 1-5 in this document. This code should not be used by the second unit that receives the transfer of a patient from another EMS provider prior to arrival at a medical facility or final destination. (This situation is coded as a rendezvous.)

02 *Unscheduled Interfacility Transfer*
Refers to transfers of patients from one facility to another facility. This code should not be used for planned, scheduled transfers, which are coded separately. This code should not be used by the second unit involved in the transfer of a patient from one EMS provider to another provider during an unscheduled interfacility transfer, which is also coded as a rendezvous.

03 *Scheduled Transfer*
Refers to transfers of patients from one facility to another facility, as defined for *interfacility*. However, this code is chosen when the transfer is scheduled in advance, such as a planned morning transfer of a patient from one hospital to another.

04 *Standby*
Refers to situation in which EMS response unit is requested to arrive at a scene and be available, such as at a football stadium. If an incident occurs during the *standby*, the service requested becomes *scene*.

05 *Rendezvous*

Refers to situation in which a second EMS unit receives transfer of patient from first EMS unit before arrival at a medical facility. Can be used when two units meet to complete the initial scene response or during an unscheduled interfacility transfer.

88 *Not Applicable*

Refers to situation in which EMS unit is placed in service.

99 *Unknown*

Refers to situation for which the other categories do not apply or when information cannot be accurately reconstructed from the run record.

6.

Name of Data Element:	Incident Disposition
Priority:	Essential
Definition:	End result of EMS response
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	23 -24

Data Items:

01	Treated, transported by EMS	06	Patient refused care
02	Treated, transferred care	07	Dead at scene
03	Treated, transported by private vehicle	08	Canceled
		09	No patient found
04	Treated and released	88	Not Applicable
05	No treatment required	99	Unknown

Content: This 2-position data element reflects the final disposition of EMS responses. Only **1 (one)** Incident Disposition should be selected.

Technical Comments: This element will provide information about the reasons for which EMS is notified, correlated with the ultimate incident disposition. For instance, it will be of value to know that in certain regions, EMS is frequently activated to see patients who require neither treatment nor transport. Reports generated from this data element may be of use in coordinating the dispatch and provider functions as well.

01 *Treated and transported by EMS*

This code should be used when an EMS provider treated and transported the patient. Transport may be to any valid destination, as defined for the data element "Destination Determination". If the EMS provider transports a patient to a rendezvous point with another EMS provider (for instance, a ground crew rendezvous with a helicopter based agency), this is the correct code for this data element.

02 *Treated, transferred care*

This code should be used when an EMS provider rendered treatment at the scene but the patient was transferred into the care of another service. The EMS provider did not provide transport in this instance. For example, if a BLS provider is at a scene and treats a patient,

but a separate ALS provider arrives and takes over, the BLS record would indicate this code. If an EMS provider treats a patient who is then transported by a separate police or fire vehicle, this is the correct code for the EMS provider record.

03 *Treated, transported by private vehicle*
This code should be used when an EMS provider rendered treatment, but the patient was transported to his or her destination by a private vehicle. This includes instances in which the patient transports himself via private automobile, if the EMS provider understands that the patient is going to seek further medical care, such as at a private doctor's office or the local emergency department.

04 *Treated and released*
This code should be used when an EMS provider rendered treatment, and the patient required no further emergency care. This is distinct from the instance in which the patient is known to be in need of further care, but chooses to transport himself or be transported by someone other than the EMS provider to the facility providing further care

05 *No treatment required*
This code should be used when an EMS provider evaluated the patient and no treatment was required. If the patient refused evaluation, or if the EMS provider did not evaluate a specific patient, do not use this code.

06 *Patient refused care*
This code should be used when the patient was at the scene and refused care, whether injured or not. If the EMS provider knows that there is an injury, but the patient refuses care and is transported by friends or acquaintances, this is still the correct code for this data element.

07 *Dead at scene*
This code should be used when the patient was pronounced dead at the scene, whether or not treatment was undertaken. This code should also be used if the patient is given CPR and is then pronounced dead at the scene. If a patient is given CPR at the scene and transported to the hospital while undergoing CPR, do not use this code.

08 *Canceled*
This code should be used when the EMS response was canceled en route or on scene.

09 *No patient found*
This code should be used if unit arrives on scene, but no patient can be found by the EMS provider or there is no patient contact. **If this code is used, then only the following information needs to be submitted for this incident: Agency Number, Units Responding, Jurisdiction Incident Number, Incident Location, Location Type, Type of Service, Incident Disposition, Attendant in Charge, Attendant 1, Attendant 2, Operator, Date Incident Reported, Time of Call, Dispatched, Responding, Arrive Scene, Arrive Patient, Leave Scene, Arrive Destination, Leave Destination, Return Service.**

88 *Not Applicable*

This code should be used when a disposition is not applicable. For instance, if the unit is on standby and no incident occurs, then this data element is not applicable. In this instance, the data element "Type of Service" will have been coded as "04 Standby". **For all "Standby" incidents, this data element should be coded as "Not Applicable".**

99 *Unknown*

This code should be used for situations in which the other categories do not apply or when information cannot be accurately reconstructed from the run record.

7.

Name of Data Element:	Attendant in Charge
Priority:	Essential
Definition:	Personnel's Virginia certification / Virginia license level of crew member
Code:	Alpha/numeric entry
Field Length:	2
Field Starting and Ending Position:	25 -26
Data Items:	

01	First Responder	06	EMT Paramedic
02	EMT	07	Nurse
03	EMT Shock Trauma	08	Physician
04	EMT Cardiac Tech	09	Other health care professional
05	Intermediate	88	Not Applicable

Content: This 2-position data element permits assessing the level of care that was available on the EMS response team. The highest certification held should be reported. **Only Virginia certifications held are applicable.**

Technical Comments: Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

88 *Not Applicable*

This code indicates there was only an operator on the unit responding to meet personnel on the scene, but the unit was canceled prior to arrival.

8.

Name of Data Element:	Attendant1
Priority:	Essential
Definition:	Personnel's Virginia certification / Virginia license level of crew member
Code:	Alpha/numeric entry
Field Length:	2
Field Starting and Ending Position:	27 - 28

Data Items:			
01	First Responder	06	EMT Paramedic
02	EMT	07	Nurse
03	EMT Shock Trauma	08	Physician
04	EMT Cardiac Tech	09	Other health care professional
05	Intermediate	88	Not Applicable

Content: This 2-position data element permits assessing the level of care that was available on the EMS response team. The highest certification held should be reported. **Only Virginia certifications held are applicable.**

Technical Comments: Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

        88 *Not Applicable*
This code indicates the actual number of providers in the ambulance was less than 3 or second attendant (Attendant2) is non-EMS certified.

9.

Name of Data Element:	Attendant2
Priority:	Essential
Definition:	Personnel's Virginia certification / Virginia license level of crew member
Code:	Alpha/numeric entry
Field Length:	2
Field Starting and Ending Position:	29 - 30

Data Items:			
01	First Responder	06	EMT Paramedic
02	EMT	07	Nurse
03	EMT Shock Trauma	08	Physician
04	EMT Cardiac Tech	09	Other health care professional
05	Intermediate	88	Not Applicable

Content: This 2-position data element permits assessing the level of care that was available on the EMS response team. The highest certification held should be reported. **Only Virginia certifications held are applicable.**

Technical Comments: Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

    88 *Not Applicable*
This code indicates the actual number of providers in the ambulance was less than 3, second attendant (Attendant2) is non-EMS certified, or there is no additional attendant.

10.

Name of Data Element:	Operator
Priority:	Essential
Definition:	Personnel's Virginia certification / Virginia license level of crew member
Code:	Alpha/numeric entry
Field Length:	2
Field Starting and Ending Position:	31 - 32

Data Items:			
01	First Responder	06	EMT Paramedic
02	EMT	07	Nurse
03	EMT Shock Trauma	08	Physician
04	EMT Cardiac Tech	09	Other health care professional
05	Intermediate	88	Not Applicable

Content: This 2-position data element permits assessing the level of care that was available on the EMS response team. The highest certification held should be reported. **Only Virginia certifications held are applicable.**

Technical Comments: Reports of value may include descriptions of therapies according to level of provider, adherence to protocols which are written differently for various levels of provider, etc.

    88 *Not Applicable*
This code includes but is not limited to non-EMS certified operators.

11.

Name of Data Element:	Date Incident Reported
Priority:	Essential
Definition:	Date the call is first received by a public safety answering point (PSAP) or other designated entity
Code:	Date format should be coded as **MMDDYYYY**
Field Length:	8
Field Starting and Ending Position:	33 - 40

Content: For month (**MM**) and day (**DD**), use leading zeros if necessary to pad the fields to 2 characters each. Format permits sorting across multiple years, and is recommended for data export purposes.

Technical Comments: Used in conjunction with "Time Incident Reported" to assess the duration between onset of a medical emergency and receipt of a request for EMS response, as well as to assess the duration of time required to mobilize the response and provide definitive care to the patient. This data element is also used to help EMS planners allocate resources by day of week and season of year.

12.

Name of Data Element:	Time of Call (Time Incident Reported)
Priority:	Essential
Definition:	Time call is first received by Public Safety Answering Point (PSAP) or other designated entity
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	41 - 44

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: When available, the time should be the connect time to the PSAP. Provides the start point of the EMS response, and allows managers to assess the adequacy of EMS response, identify delays, and plan resources in a manner to provide expeditious EMS response.

8888 *Not Applicable*
This code should be used **only** when the EMS system does not capture this data element or when the unit cannot obtain the time when the PSAP received the call.

13.

Name of Data Element:	Dispatched (Time Unit Notified)
Priority:	Essential
Definition:	Time response unit is notified by EMS dispatch
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	45 - 48

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Permits measurement of the actual EMS provider's response or delays. Assists planning of communication resources for individual providers, and allows identification of system delays following the dispatch component of the EMS system.

      8888 *Not Applicable*
This code should be used **only** when the EMS system does not capture this data element or when the unit cannot obtain the time when the PSAP received the call.

14.

Name of Data Element:	Responding (Time Unit Responding)
Priority:	Essential
Definition:	Time that the response unit begins physical motion
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	49 - 52

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Permits measurement of delay between the notification of the EMS provider and the actual mobilization of the response unit. This data element refers to the physical motion of the responding EMS vehicle, and does not refer to individual EMT's who may respond directly to the scene when notified by individual radio or telephone. For example, if an EMS incident is reported, one EMT may be at home or at work and be responsible to go to the station that holds the ambulance. Another EMT may be notified and may drive in a private vehicle directly to the scene. This data element should reflect the time that the ambulance actually leaves the station, not the time at which the other EMT drives to the scene in the private vehicle.

8888 *Not Applicable*

This code should be used when a unit was placed in service prior to designating a response.

15.

Name of Data Element:	Arrive Scene (Time Arrival at Scene)
Priority:	Essential
Definition:	Time EMS unit stops physical motion at scene (last place that the unit or vehicle stops prior to assessing the patient)
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	53 - 56

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Permits measurement of the time required for the response vehicle to go from the station to the scene. This data element refers to the physical motion of the responding EMS vehicle. Do NOT use this element to indicate the time an individual EMT arrives at the scene by private vehicle. Otherwise, system delays in having an equipped vehicle at the scene will fail to be identified.

8888 *Not Applicable*

This code should be used when a unit was placed in service prior to arriving at the scene.

16.

Name of Data Element:	Arrive Patient (Time of Arrival at Patient)
Priority:	Desirable
Definition:	Time response personnel establish direct contact with patient
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	57 - 60

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Desirable in certain situations in which there may be a significant delay between the time at which a response unit arrives at the scene and the time at which the personnel can access the patient. For example, if the providers are prevented from approaching the patient because of fire or adverse conditions, this time will be useful. Search and rescue operations will also note delays between arrival at the overall scene and the actual patient contact.

8888 *Not Applicable*

This code should be used when a unit was placed in service prior to arriving at patient or the EMS system does not capture this data element.

17.

Name of Data Element:	Leave Scene (Time Unit Left Scene)
Priority:	Essential
Definition:	Time when the response unit begins physical motion from scene
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	61 - 64

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Permits calculation of scene time by subtracting the time of arrival at scene from the time unit left scene.

8888 *Not Applicable*

This code should be used when a unit was placed in service prior to arriving at the scene.

18.

Name of Data Element:	Arrive Dest (Time Arrival at Destination)
Priority:	Essential
Definition:	Time when patient arrives at destination or transfer point
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	65 - 68

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Permits calculation of the time required to go from the scene to the destination of the response unit. If the patient is transferred from one EMS provider vehicle to another, then the time of arrival at destination for the first provider is the time of arrival or patient contact (or both) for the second agency.

8888 *Not Applicable*

This code should be used when a unit does not transport a patient.

19.

Name of Data Element:	Leave Dest (Time Left Destination)
Priority:	Desirable
Definition:	Time response unit leaves destination or transfer point
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	69 - 72

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Permits calculation of time unit remained at destination location.

        8888 *Not Applicable*
This code should be used when a unit does not reach destination or EMS system does not capture this data element.

20.

Name of Data Element:	Return Serv (Time Back in Service)
Priority:	Essential
Definition:	Time response unit back in service and available for response
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	73 - 76

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Allows planning of EMS resources. Permits assessment of the delay between arrival at destination and availability of the response unit.

        8888 *Not Applicable*
This code should be used **only** when the EMS system does not capture this data element.

21.

Name of Data Element:	Patient's City/County FIPS (Residence)
Priority:	Essential
Definition:	Patient city or township of residence (if applicable)
Code:	Numeric entry
Field Length:	5
Field Starting and Ending Position:	77 - 81

Data Items:
{5 digit FIPS code}
51124 Out of State
88888 Not Applicable
51999 Unknown

Content: This 5-position element must be coded using the FIPS system, wherein each locality is encoded with a unique number. In Virginia, each FIPS number begins with '51' (i.e. Prince William County is coded as '51153'). City, town or county FIPS codes are only unique within a state.

See Appendix C for a complete list of VA City/Co FIPS codes.

Technical Comments: Field may be used for local jurisdiction reports.

      88888 *Not Applicable*
This code should be used when the patient has no permanent address.

      51999 *Unknown*
This code should be used when the patient is unable to communicate or when information cannot be accurately reconstructed from the run record.

22.

Name of Data Element:	Patient's Zip Code (Residence)
Priority:	Essential
Definition:	Zip Code of patient's residence
Code:	Numeric entry
Field Length:	5
Field Starting and Ending Position:	82 - 86

Data Items:
{5 digit ZIP code}
88888 Not Applicable
99999 Unknown

Content: The 5-position code issued by the U S Post Office that identifies where the patient resides.

Technical Comments: Useful for determining the political entity responsible for potential public health interventions, payment for services, etc.

    88888 *Not Applicable*
This code should be used when the patient has no permanent address.

    99999 *Unknown*
This code should be used when the patient is unable to communicate or when information cannot be accurately reconstructed from the run record.

23.

Name of Data Element:	Social Security Number
Priority:	Essential
Definition:	Patient Social Security number
Code:	Numeric entry
Field Length:	9
Field Starting and Ending Position:	87 - 95
Data Items: {9 digit SSN} 888888888 Not Applicable 999999999 Unknown	

Content: The 9-position number used by the Social Security Administration to uniquely identify citizens of the United States.

Technical Comments: Could provide valuable linkage; however, this field is very difficult for field providers to obtain.

    888888888 *Not Applicable*
This code should be used when the patient has no Social Security Number.

    999999999 *Unknown*
This code should be used when the patient is unable to communicate or when information cannot be accurately reconstructed from the run record.

24.

Name of Data Element:	Date of Birth
Priority:	Essential
Definition:	Patient's date of birth
Code:	Date format should be coded as **MMDDYYYY**
Field Length:	8
Field Starting and Ending Position:	96 - 103
Data Items:	
99999999 Unknown	

Content: For month (**MM**) and day (**DD**), use leading zeros if necessary to pad the fields to 2 characters each. Format permits sorting across multiple years, and is recommended for data export purposes.

Technical Comments: Extremely valuable for probabilistic linkage and calculation of accurate age information. Provides much more discriminatory power in probabilistic linkage than the numeric age.

99999999 *Unknown*
This code should be used when the patient is unable to communicate or when information cannot be accurately reconstructed from the run record.

25.

Name of Data Element:	Age
Priority:	Desirable
Definition:	Patient's age or best approximation
Code:	Numeric entry
Field Length:	4
Field Starting and Ending Position:	104 - 107
Data Items:	

{3 digits for age} or 999 for Unknown
PLUS one of the following identifiers:
    Y   Years
    M   Months
    D   Days
    U Unknown	

Content: Use leading zeros if necessary to pad the field to 4 positions. For patients over 1 year, specify Y (e.g. 6 years = 006Y). For patients less than 1 year, specify M (e.g. 6 months = 006M). For patients less than 1 month, specify D (e.g. 6 days = 006D). For patients less than 1 day (24 hours), specify 000D. When the age is unknown, specify 999U.

Technical Comments: Age information permits linkage to other files, and is useful for epidemiologists interested in patterns of emergency medical problems in different age groups.

      999 *Unknown*
This code should be used when the patient is unable to communicate, when the patient's age cannot be approximated due to decomposition, burns, etc. or when information cannot be accurately reconstructed from the run record.

26.

Name of Data Element:	Gender
Priority:	Essential
Definition:	Gender of patient
Code:	Alphabetic entry
Field Length:	2
Field Starting and Ending Position:	108 - 109
Data Items: 01 Male 02 Female 88 Not Applicable 99 Unknown	

Content: The 2-position code used to describe the sex of the patient.

Technical Comments: Valuable for linkage to other files, and permits reporting of epidemiological information by gender.

      88 *Not Applicable*
This code should be used when none of the other codes apply.

      99 *Unknown*
This code should be used when the sex of the patient cannot be accurately determined due to decomposition, burns, etc. or when information cannot be accurately reconstructed from the run record.

27.

Name of Data Element:	Race / Ethnicity
Priority:	Essential
Definition:	Patient's ethnic origin
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	110 - 111

Data Items:

01	White, non-Hispanic	05	American Indian/Alaska Native
02	White, Hispanic	06	Asian/Pacific Islander
03	Black, non-Hispanic	77	Other
04	Black, Hispanic	88	Not Applicable
		99	Unknown

Content: This 2-position data element is useful for epidemiological studies, and of importance to data systems in order to access certain types of Federal or state funds that are directed to specific ethnic groups. Only **1 (one)** Race should be selected.

Technical Comments: Data item format taken from the Office of Management and Budget Directive 15. Race and ethnicity have been combined, as the Hispanic or Non-Hispanic indicators primarily apply to only Black or White patients.

77 *Other*

This code should be used when race can be determined but is not one of the races specified.

88 *Not Applicable*

This code should be used when none of the other codes are appropriate.

99 *Unknown*

This code should be used when the patient's race cannot be accurately determined due to decomposition, burns, etc. or when information cannot be accurately reconstructed from the run record.

28.

Name of Data Element:	Pre-existing Condition (PEC)
Priority:	Essential
Definition:	Pre-existing medical conditions known to the provider
Code:	Numeric or Alpha/numeric entry
Field Length:	10
Field Starting and Ending Position:	112 - 121

Data Items:

01	Asthma (493.90)	08	Cancer (239.90)
02	Diabetes (250.00)	09	Hypertension (401.90)
03	Tuberculosis (011.90)	10	Psychiatric problems (312.90)
04	Emphysema (492.80)	11	Seizure disorder (780.30)
05	Chronic respiratory failure (518.81)	12	Tracheostomy
		77	Other
06	Heart Disease (490.90)	88	Not Applicable
07	Chronic renal failure (585.00)	99	Unknown

Content: This 2-position data element is intended to capture information as understood by EMS providers at the scene, not as defined later in the medical record of the hospital. Thus, if the EMS provider finds out that a patient has several pre-existing conditions after he or she arrives at the hospital, those conditions should **not** be coded in this data element. **Up to 5 (five)** Pre-existing Conditions can be selected.

Technical Comments: Multiple entries are possible.

  77 *Other*
This code should be used when a PEC is present but is not one of the conditions specified.

  88 *Not Applicable*
This code should be used to indicate no PEC.

  99 *Unknown*
This code should be used when the patient is unable to communicate or when information cannot be accurately reconstructed from the run record.

29.

Name of Data Element:	Mechanism of Injury
Priority:	Essential
Definition:	External cause of injury
Code:	Alpha/numeric entry
Field Length:	10
Field Starting and Ending Position:	122 - 131

<div align="center">

Data Items:

</div>

01	Aircraft related accident
02	Assault
03	Bicycle accident
04	Bites
05	Burns/thermal/chemical
06	Chemical poisoning
07	Drowning
08	Drug poisoning
09	Electrocution (non-lightning)
10	Excessive cold
11	Excessive heat
12	Falls
13	Firearm injury
14	Lightning
15	Machinery accidents
16	Mechanical suffocation
17	MVC - non-public road/off road
18	MVC - public road
19	Pedestrian traffic accident
20	Radiation exposure
21	Smoke inhalation
22	Sports Injury
23	Stabbing
24	Venomous stings (plants, animals)
25	Water transport accident
77	Other
88	Not Applicable
99	Unknown

Content: It is necessary to have a broad taxonomy for defining the external causes of injury, and this 2-position data element is coded according to the E codes in ICD-9. However, it is recognized that the entire E code list is too cumbersome for field use, and the element may be collapsed into the categories that have been listed above. When possible, the E code should be defined in as much detail as is present in the E code definitions. Such codes will always be collapsible to the categories defined here, but the added detail will provide additional value to injury prevention researchers. It has been traditional to attempt to assign a single E code to individual incidents.   Multiple entries, however, aid in gathering better detail about injuries, and eliminate confusion when the EMS provider must choose between two reasonable E codes. **Up to 5 (five)** Mechanisms of Injury can be selected.

Technical Comments: This data element is based on E codes, but the coding structure is intended to be more flexible. Additional categories for not applicable and unknown have been added, so that this data element can always be filled in on the database. The item list is shown below, and the actual code number is indicated. When the code number includes lowercase x's, this means that the item list includes all E codes that have the initial part of the code. For example, motor vehicle traffic crash is coded as E81x.x, and would include any E code from E810.0 through E819.9.

01 *Aircraft related accident (E Code E84x.x)*
Includes spacecraft.

02 *Assault (ECode E967.x)*
Includes all forms of non-accidental injury or suspected intentional injury caused by others.

03 *Bicycle accident (E Code E826.x)*
Includes any pedal cycle accident. Pedal cycle is defined to include bicycles, tricycles, and excludes any motorized cycles.

04 *Bites (E Code E906.x)*
Includes all animal bites, including those from non-venomous snakes and lizards and those bites from animals of unknown venomous nature.

05 *Burns/thermal/chemical (E Code E89x.x)*
Includes burning by fire, asphyxia or poisoning from conflagration (fire, wildfire) or ignition, and fires secondary to explosions.

06 *Chemical poisoning (E Code E86x.x)*
Includes accidental poisoning by solid or liquid substances, gases, and vapors, which are not included under accidental drug poisoning.

07 *Drowning (E Code E910.x)*
Accidental drowning not related to watercraft use. Includes swimming accidents, bathtubs, etc.

08 *Drug poisoning (E Code E85x.x)*
Includes accidental poisoning by drugs, medicinal substances, or biological products. Extensive codes are available if an agency wishes to collect specific information.

09 *Electrocution (non-lightning) (E Code E925.x)*
Includes accidents related to electric current from exposed wire, faulty appliance, high voltage cable, live rail, or open electric socket. Excludes lightning, which is coded as 14 Lightning.

10 *Excessive cold (E Code E901.x)*
Includes cold injury due to weather exposure, or cold produced by man, such as in a freezer.

11 *Excessive heat (E Code E900.x)*
Includes thermal injuries related to weather or heat produced by man, such as in a boiler room or factory. Excludes heat injury from conflagration.

12 *Falls (E Code E88x.x)*

Excludes falls which occur in the context of other external causes of injury, such as fires, falling off boats, or falling in accidents involving machinery.

13 *Firearm injury (E Code E985.x)*
These codes refer to firearm injuries involving handguns, shotguns, hunting rifles, etc.

14 *Lightning (E Code E907.x)*
Excludes falling of an object secondary to lightning, and also excludes injuries from fire secondary to lightning.

15 *Machinery accidents (E Code E919.x)*
Includes all machinery accidents except when machinery is not in operation.   Excludes electrocution.

16 *Mechanical suffocation (E Code E913.x)*
Includes suffocation in bed or cradle (crib death), closed space suffocation, plastic bag asphyxia, accidental hanging, etc.

17 *MVC - non-public road/off road (E Code E82x.x)*
This includes any motor vehicle crash occurring entirely off public roadways or highways. For instance, a crash involving an all terrain vehicle (ATV) in an off-road location would be a non-traffic crash.

18 *MVC - public road (E Code E81x.x)*
This includes any motor vehicle crash occurring on a public roadway or highway.

19 *Pedestrian traffic crash (E Code E814.x)*
Motor vehicle crashes in which the patient was a pedestrian struck by a motor vehicle of any type.   Includes individuals on skates, in baby carriages, in wheelchairs, on skateboards, skiers, etc.

20 *Radiation exposure (E Code E926.x)*
Excludes complications of radiation therapy.

21 *Smoke inhalation (E Code E89x.2)*
Includes smoke and fume inhalation from conflagration.

22 *Sports injury (E Code E917.x*)
Includes all sports related injuries caused by team member or sports equipment.

23 *Stabbing (E Code E966.x*)
Includes cuts, punctures, or stabs of any part of the body.

24 *Venomous stings (plants, animals) (E Code E905.x*)
Includes only those bites and stings from snakes, lizards, spiders, scorpion, insects, marine life, or plants known to be venomous.

25 *Water transport accident (E Code E83x.x*)
Includes all accidents related to watercraft. Excludes drowning and submersion accidents unless they are related to watercraft use. Thus, if a person falls out of a boat and drowns, it

should be coded within this category. If a person drowns in a swimming pool or bathtub, it should be coded as 07 Drowning.

77 *Other*
This code is provided primarily for situations in which there is a Mechanism of Injury that is not included in those listed.

88 *Not Applicable*
This code should be used where an external injury code does not apply, such as when a patient suffers from chest pain or fever. In nearly all instances where an injury has occurred, this data element should be filled in with a valid code, other than the Not Applicable designation.

99 *Unknown*
This code is provided primarily for situations in which the data is being entered at a time when the information cannot be accurately reconstructed from the run record. This should be a rare entry.

30.

Name of Data Element:	Injury Description
Priority:	Essential
Definition:	Clinical description of injury type and body site
Code:	Alphabetic and numeric entry
Field Length:	10
Field Starting and Ending Position:	132 - 141

<table>
<tr><td colspan="2" align="center">Data Items:</td></tr>
<tr><td><u>Body Sites</u></td><td><u>Injury Types</u></td></tr>
<tr><td>B   Face (including ear)</td><td>1   Swelling/bruising</td></tr>
<tr><td>A   Head only (excluding neck,
cervical spine and ear)</td><td>2   Blunt injury</td></tr>
<tr><td>C   Neck</td><td>3   Laceration</td></tr>
<tr><td>F   Spine</td><td>4   Deformity</td></tr>
<tr><td>D   Thorax (excluding thoracic spine)</td><td>5   Puncture/stab</td></tr>
<tr><td>G   Hand, Arm</td><td>6   Gunshot</td></tr>
<tr><td>E   Abdomen (excluding lumbar spine)</td><td>7   Amputation</td></tr>
<tr><td>H   Foot, Leg or bony pelvis</td><td>8   Crush</td></tr>
<tr><td>I   Body region unspecified</td><td>9   Burn</td></tr>
<tr><td>88   Not Applicable</td><td></td></tr>
</table>

Content: Intended to permit the detailed listing of all injuries sustained by a patient, coded according to injury type and body site of the injury. It is stressed that this 2-position data element is supposed to reflect the clinical assessment of injury by the EMS provider, not necessarily the final, correct medical diagnosis. Multiple entries will be possible. Each injury should be designated by body site and injury type. The **most severe 5 (five)** injuries should be reported.

Technical Comments: Each entry into this data element should be coded as 2 positions, the first for body site and the second for injury type (e.g. crushed pelvis = H8).

88 *Not Applicable*

This code should be used if the only description was pain or there was no injury noted.

31.

Name of Data Element:	Signs and Symptoms Present
Priority:	Essential
Definition:	Signs and symptoms reported to or observed by provider
Code:	Numeric entry
Field Length:	10
Field Starting and Ending Position:	142 - 151

Data Items:

01	Abdominal pain (789.00)	14	Hypertension (401.90)
02	Back pain (724.50)	15	Hypothermia (780.90)
03	Bloody stools (578.10)	16	Nausea (787.00)
04	Breathing difficulty (786.09)	17	Paralysis (344.90)
05	Cardioresp. arrest (427.50)	18	Palpitations (785.10)
06	Chest pain (786.50)	19	Pregnancy/childbirth/miscarriage (659.90)
07	Choking (933.10)	20	Seizures/convulsions (780.30)
08	Diarrhea (558.90)	21	Syncope (780.20)
09	Dizziness (780.40)	22	Unresponsive/unconscious (780.09)
10	Ear pain (388.70)	23	Vaginal bleeding (623.80)
11	Eye pain (379.91)	24	Vomiting (787.00)
12	Fever/Hyperthermia (780.60)	25	Weakness (malaise) (780.70)
13	Headache (784.00)	77	Other

Content: This 2-position data element is intended to capture the information provided to or obtained by the EMS provider in order to assess the patient. It is intended that these signs and symptoms be correlated with the clinical assessment of the provider. Up to **5 (five)** Signs and Symptoms can be selected.

Technical Comments: The ICD-9 codes are included in parenthesis for reference; however, the 2-position numeric codes to the left of each sign/symptom should be reported. Multiple entries are possible.

77 *Other*

This code is provided primarily for situations in which there is a Sign and Symptom that is not included in those listed.

32.

Name of Data Element:	Unused (Formerly Provider Impression)
Field Length:	2
Field Starting and Ending Position:	152 - 153

Data Items:
Moved to Data Element #59

33.

Name of Data Element:	Systolic/Diastolic Blood Pressure
Priority:	Essential
Definition:	Patient's systolic/diastolic blood pressure
Code:	Numeric entry
Field Length:	6
Field Starting and Ending Position:	154 - 159

Data Items:
{6 digit blood pressure}
###/777   Palpated (Systolic only)
888/888   Not Obtained
999/999   Unable To

Content: This 6-position data element records the blood pressure of the patient. There should be no / in the field when used for export purposes. Palpated blood pressure should include the systolic blood pressure followed by 777 (e.g. 110777).

Technical Comments:

888 *Not Obtained*
This code should be used when blood pressure is not assessed.

999 *Unable To*
This code should be used when blood pressure cannot be assessed due to a physical barrier.

34.

Name of Data Element:	Pulse Rate
Priority:	Essential
Definition:	Patient's palpated or auscultated pulse rate expressed in number per minute
Code:	Numeric entry
Field Length:	3
Field Starting and Ending Position:	160 - 162
Data Items: {3 digit pulse rate} 888 Not Obtained 999 Unable To	

Content: This 3-position data element is based on the physical examination of the patient. The pulse must be palpated or auscultated. An electrical rhythm is not sufficient, as the patient could have electromechanical dissociation (EMD) or pulseless electrical activity (PEA). In this instance, the correct value of this data element is "000".

Technical Comments:

     888 *Not Obtained*
This code should be used when pulse rate is not assessed.

     999 *Unable To*
This code should be used when pulse rate cannot be assessed due to a physical barrier.

35.

Name of Data Element:	Respiratory Rate
Priority:	Essential
Definition:	Unassisted patient respiratory rate expressed as number per minute
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	163 - 164
Data Items: {2 digit respiratory rate} 88 Not Obtained 99 Unable To	

Content: This 2-position data element records the rate at which the patient is breathing without assistance. If a patient is not breathing and requires artificial ventilation, this data element should be coded as "00". **Do not indicate the assisted ventilation rate.**

Technical Comments:

      88 *Not Obtained*
This code should be used when respiratory rate is not assessed.

      99 *Unable To*
This code should be used when respiratory rate cannot be assessed due to a physical barrier.

36.

Name of Data Element:	Respiratory Effort
Priority:	Essential
Definition:	Patient respiratory effort
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	165 - 166
Data Items:	
01 Normal 02 Increased, not labored 03 Increased/labored OR Decreased/fatigued 04 Absent 88 Not Obtained	

Content: This 2-position data element indicates the patient's ventilatory effort. If a patient is not breathing and requires artificial ventilation, this data element should be coded as "04 Absent".

Technical Comments:

      88 *Not Obtained*
This code should be used when respiratory effort is not assessed.

37.

Name of Data Element:	Skin Perfusion
Priority:	Essential
Definition:	Patient skin perfusion, expressed as normal or decreased
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	167 - 168

Data Items:
01   Normal
02   Decreased
88   Not Obtained

Content: This 2-position data element describes the circulation of blood through the patient's skin. "Normal" is defined as warm, pink, and with a capillary refill time of 2 or less seconds. "Decreased" is defined as cool, pale, mottled, dusky, and with a capillary refill time of greater than 2 seconds.

Technical Comments:

88 *Not Obtained*
This code should be used when skin perfusion is not assessed.

38.

Name of Data Element:	Glasgow Eye Opening Component
Priority:	Essential
Definition:	Patient's eye opening component of the Glasgow coma scale
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	169 - 170

Data Items:
01   None
02   Opens eyes in response to painful stimulation
03   Opens eyes in response to verbal stimulation
04   Opens eyes spontaneously
88   Not Obtained

Discussion and Justification: This 2-position data element is one of three components of the Glasgow coma scale (GCS), which is widely used to assess neurological status. The score and its components are also parts of a variety of triage scoring systems.

Technical Comments:

88 *Not Obtained*

This code should be used when this component of the GCS is not assessed.

39.

Name of Data Element:	Glasgow Verbal Component
Priority:	Essential
Definition:	Patient's verbal component of the Glasgow coma scale
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	171 - 172

Data Items:
For patients >5 years:
01   None
02   Non-specific sounds
03   Inappropriate words
04   Confused conversation or speech
05   Oriented and appropriate speech
For patients 2-5 years:
01   None
02   Grunts
03   Cries and/or screams
04   Inappropriate words
05   Appropriate words
For patients 0-23 months:
01   None
02   Persistent cry, grunting
03   Inappropriate cry
04   Cries, inconsolable
05   Smiles, coos, cries appropriately
88   Not Obtained

Content: This 2-position data element is one of three components of the Glasgow coma scale (GCS), which is widely used to assess neurological status.   The score and its components are also parts of a variety of triage scoring systems.

Technical Comments: If the patient is intubated and deeply comatose, then this data element is coded as "01" for none, since there was no verbal response at the time of intubation. However, if the patient is intubated but not deeply comatose, and there is a possibility of verbal response, it is difficult to apply the Glasgow coma scale. The EMS provider can ask questions and if the patient can nod his head or blink eyes, etc. appropriately, then this element is coded as "05".

88 *Not Obtained*

This code should be used when this component of the GCS is not assessed.

40.

Name of Data Element:	Glasgow Motor Component
Priority:	Essential
Definition:	Patient's motor component of the Glasgow coma scale
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	173 - 174

Data Items:
For patients >5 years: 01   None 02   Extensor posturing in response to painful stimulation 03   Flexor posturing in response to painful stimulation 04   General withdrawal in response to painful stimulation 05   Localization of painful stimulation 06   Obeys commands with appropriate motor response For patients up to 5 years: 01   None 02   Extensor posturing in response to painful stimulation 03   Flexor posturing in response to painful stimulation 04   General withdrawal in response to painful stimulation 05   Localization of painful stimulation 06   Spontaneous 88   Not Obtained

Content: This 2-position data element is one of three components of the Glasgow coma scale (GCS), which is widely used to assess neurological status. The score and its components are also parts of a variety of triage scoring systems.

Technical Comments:

88 *Not Obtained*

This code should be used when this component of the GCS is not assessed. This component cannot be assessed if the patient has received a muscle relaxant.

41.

Name of Data Element:	Time of Witnessed Cardiac Arrest
Priority:	Essential
Definition:	Time of witnessed cardiac arrest
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	175 - 178

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Allows assessment of actual total arrest time in patients with cardiac arrest.

      8888 *Not Applicable*
This code should be used when there is no need for CPR given the condition of the patient.

42.

Name of Data Element:	Time of First CPR
Priority:	Essential
Definition:	Best estimate of time of first CPR
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	179 - 182

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Permits assessment of the duration of cardiopulmonary resuscitation prior to arrival of EMS provider.

      8888 *Not Applicable*
This code should be used when there is no need for CPR given the condition of the patient.

43.

Name of Data Element:	Provider of First CPR
Priority:	Essential
Definition:	Person who performed first CPR on patient
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	183 - 184

Data Items:
01   Bystander
02   Responder
88   Not Applicable
99   Unknown

Content: This 2-position data element is useful for assessing the occupance of CPR rendered by initial providers to a cardiorespiratory arrest, for planning public educational efforts, etc.

Technical Comments:

Responder
This code should be used for all levels of Virginia certified providers.

88 *Not Applicable*
This code should be used when there is no need for CPR given the condition of the patient or when it is known that there was no CPR rendered.

99 *Unknown*
This code should be used when CPR is performed but who performed it cannot be determined or when the data is being entered long after the actual incident and the information cannot be accurately reconstructed from the run record.

44.

Name of Data Element:	Time of First Defibrillatory Shock
Priority:	Essential
Definition:	Time of first defibrillatory shock
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	185 - 188

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: Allows assessment of the time required between onset of cardiac arrest and provision of defibrillation in instances of ventricular fibrillation.

　　　8888 *Not Applicable*
This code should be used when there is no need for defibrillation given the condition of the patient.

45.

Name of Data Element:	Provider of First Defib
Priority:	Essential
Definition:	Person who performed first defib on patient
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	189 - 190

Data Items:	
01	Bystander
02	Responder
88	Not Applicable
99	Unknown

Content: This 2-position data element is useful for assessing the defibrillation rendered by initial providers to a cardiorespiratory arrest, for planning public educational efforts, etc.

Technical Comments:

　　　Responder
This code should be used for all levels of Virginia certified providers including those personnel trained under the AED certification program.

　　　88 *Not Applicable*
This code should be used when there is no need for defibrillation given the condition of the patient or when it is known that there was no defibrillation rendered.

　　　99 *Unknown*
This code should be used when defibrillation is performed but who performed it cannot be determined or when the data is being entered long after the actual incident and the information cannot be accurately reconstructed from the run record.

46.

Name of Data Element:	Defib Device
Priority:	Essential
Definition:	Type of device used for initial patient defib
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	191 - 192

<table>
<tr><td colspan="2" align="center">Data Items:</td></tr>
<tr><td align="right">01</td><td>AED</td></tr>
<tr><td align="right">02</td><td>Manual</td></tr>
<tr><td align="right">88</td><td>Not Applicable</td></tr>
<tr><td align="right">99</td><td>Unknown</td></tr>
</table>

Content: This 2-position data element is useful for assessing the defibrillation rendered by initial providers to a cardiorespiratory arrest, for planning public educational efforts, etc.

Technical Comments:

88 *Not Applicable*

This code should be used when there is no need to use a defib device given the condition of the patient or when it is known that there was no defib device used.

99 *Unknown*

This code should be used when defibrillation is performed but the device used cannot be determined or when the data is being entered long after the actual incident and the information cannot be accurately reconstructed from the run record.

47.

Name of Data Element:	Time CPR Discontinued
Priority:	Essential
Definition:	Time at which medical control or responding EMS unit terminated resuscitation efforts (chest compressions and CPR) in the field
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	193 - 196

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59.   Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments: This data element is undefined if CPR was never administered.

8888 *Not Applicable*

This code should be used when CPR is continued at the Hospital.

48.

Name of Data Element:	Time Circulation Returned
Priority:	Essential
Definition:	Time of restored palpable pulse following resuscitation in the field
Code:	Time format should be coded as **HHMM**
Field Length:	4
Field Starting and Ending Position:	197 - 200

Content: **HH** ranges from 00 to 23; **MM** ranges from 00 to 59. Midnight is coded as 0000, and begins the new day. There should be no colon in the field when used for export purposes. Use leading zeros to assure 2-character field width for HH and MM.

Technical Comments:

8888 *Not Applicable*

This code should be used when no resuscitation is performed or circulation was not returned in the field or CPR was discontinued in the field.

49.

Name of Data Element:	EKG Initial (Initial Cardiac Rhythm)
Priority:	Essential
Definition:	Initial monitored cardiac rhythm as interpreted by EMS personnel
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	201 - 202

<div align="center">Data Items:</div>

01	Sinus rhythm	06	Narrow complex tachycardia
02	Other rhythm from 60-100 (not otherwise listed)	07	Wide complex tachycardia
		08	Ventricular fibrillation
03	Paced rhythm	09	Asystole
04	Bradycardia	10	Pulseless electrical activity
05	Extrasystoles	77	Other
		88	Not Applicable

Content: This 2-position data element provides the initial monitored rhythm.

Technical Comments: It is understood that some agencies collect data about cardiac rhythms with more detail than this list. For instance, many agencies expect EMS personnel to distinguish first, second, and third degree heart block. There is no intention to restrict the

manner in which any agencies decide to code cardiac rhythms, but there is a necessity to be able to collapse those rhythms to a common definition that can then be combined. For the examples of heart block mentioned, those would all collapse into a wide or narrow complex tachycardia (if the rate is > 100), other rhythm between 60 and 100, or bradycardia, if heart rate < 60.

77 *Other*

This code is provided primarily for situations in which the patient presents a Rhythm that is not included in those listed.

88 *Not Applicable*

This code should be used when the EMS provider is not an appropriate level to assess electrical rhythm, or if electrical monitoring is unavailable to the provider.

50.

Name of Data Element:	EKG Last (Rhythm at Destination)
Priority:	Essential
Definition:	Monitored cardiac rhythm upon arrival at destination
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	203 - 204

Data Items:

01	Sinus rhythm	06	Narrow complex tachycardia
02	Other rhythm from 60-100 (not otherwise listed)	07	Wide complex tachycardia
		08	Ventricular fibrillation
03	Paced rhythm	09	Asystole
04	Bradycardia	10	Pulseless electrical activity
05	Extrasystoles	77	Other
		88	Not Applicable

Content: This 2-position data element captures the electrical rhythm at the time of arrival at a destination, as previously defined.

Technical Comments: It is understood that some agencies collect data about cardiac rhythms with more detail than this list. For instance, many agencies expect EMS personnel to distinguish first, second, and third degree heart block. There is no intention to restrict the manner in which any agencies decide to code cardiac rhythms, but there is a necessity to be able to collapse those rhythms to a common definition that can then be combined. For the examples of heart block mentioned, those would all collapse into a wide or narrow complex tachycardia (if the rate is > 100), other rhythm between 60 and 100, or bradycardia, if heart rate < 60.

77 *Other*

This code is provided primarily for situations in which the patient presents a Rhythm that is not included in those listed.

88 *Not Applicable*

This code should be used when the EMS provider is not an appropriate level to assess electrical rhythm, or if electrical monitoring is unavailable to the provider.

51.

Name of Data Element:	Procedure or Treatment Name
Priority:	Essential
Definition:	Identification of procedure attempted or performed on patient
Code:	Numeric entry
Field Length:	60
Field Starting and Ending Position:	205 - 264

<table>
<tr><td colspan="3" align="center">Data Items:</td></tr>
<tr><td>Airway</td><td>01</td><td>Assisted ventilation (BVM) (96.70)</td></tr>
<tr><td></td><td>02</td><td>Positive pressure ventilation (96.70)</td></tr>
<tr><td></td><td>03</td><td>Chest decompression</td></tr>
<tr><td></td><td>04</td><td>Cricothyrotomy (31.10)</td></tr>
<tr><td></td><td>05</td><td>EGTA/EOA/PTL/CBT</td></tr>
<tr><td></td><td>06</td><td>ET (96.04)</td></tr>
<tr><td></td><td>07</td><td>Nasal airway (96.01)</td></tr>
<tr><td></td><td>08</td><td>NG tube (96.05)</td></tr>
<tr><td></td><td>09</td><td>Oral airway (96.02)</td></tr>
<tr><td></td><td>10</td><td>Nasal cannula (93.96)</td></tr>
<tr><td></td><td>11</td><td>Oxygen mask (93.96)</td></tr>
<tr><td>Misc.</td><td>12</td><td>Backboard (93.59)</td></tr>
<tr><td></td><td>13</td><td>Bleeding controlled (39.98)</td></tr>
<tr><td></td><td>14</td><td>Burn care (93.57)</td></tr>
<tr><td></td><td>15</td><td>CPR (99.60)</td></tr>
<tr><td></td><td>16</td><td>ECG monitoring (89.51)</td></tr>
<tr><td></td><td>17</td><td>External defibrillation/cardioversion (includes AED) (99.62)</td></tr>
<tr><td></td><td>18</td><td>Immobilization - Extremity (93.54)</td></tr>
<tr><td></td><td>19</td><td>Immobilization - Spine</td></tr>
<tr><td></td><td>20</td><td>Immobilization - Traction Splint (93.54)</td></tr>
<tr><td></td><td>21</td><td>Intravenous catheter (38.93)</td></tr>
<tr><td></td><td>22</td><td>Intraosseous catheter   (41.92)</td></tr>
<tr><td></td><td>23</td><td>Intravenous fluids (99.29)</td></tr>
<tr><td></td><td>24</td><td>MAST/PASG (93.58)</td></tr>
<tr><td></td><td>25</td><td>Medication Administration</td></tr>
<tr><td></td><td>26</td><td>Obstetrical care (delivery) (73.59)</td></tr>
<tr><td></td><td>27</td><td>Pacing</td></tr>
<tr><td></td><td>77</td><td>Other</td></tr>
<tr><td></td><td>88</td><td>Not Applicable</td></tr>
</table>

Content: This 2-position data element provides planners and educators with information about which procedures are conducted in the field, by whom, and for what indications. Procedures are defined here as anything done by way of assessment or treatment of the patient. Thus, application of a cervical collar is a treatment, use of a cardiac monitor is a tool

of assessment, and drawing blood tubes is neither a specific treatment nor a means of field assessment. All of these would be considered procedures for purposes of this data element. The procedures listed above are not a restrictive list, nor is it expected that every agency will permit its providers to carry out all of these procedures. The coding system used above is the ICD-9 Procedure Classification (p codes). **All Procedures or Treatments performed** on the patient should be specified.

Technical Comments:

        77 *Other*
This code should be used when none of the codes listed can be applied; however, a procedure was performed.

        88 *Not Applicable*
This code should be used when no procedures are performed.

52.

Name of Data Element:	Treatment Authorization
Priority:	Essential
Definition:	Indicates the type, if any, of treatment authorization
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	265 - 266
**Data Items** 01   Standing Orders 02   On-Line (Radio Telephone) 03   On-Scene 04   Transfer Orders (Patient Specific) 05   DNR 88   Not Applicable 99   Unknown

Content: This 2-position data element enables managers of EMS systems to determine the authorization type used for emergency medical care provided on specific EMS runs. Only the **single highest level** of authorization obtained for patient treatment should be selected.

Technical Comments: Following is a more detailed explanation of the Data Items that define Treatment Authorization:

        01 *Standing Orders*
Pre-established physician authorized procedures or guidelines for medical care of a specified clinical situation, based on patient presentation.   Also known as protocol.   The pre-establishment of protocols is the responsibility of a physician having responsibility for medical direction of an EMS system.
        02 *On-line (Radio Telephone)*

Immediate physician orders to EMS provider through direct telecommunications such as radio or telephone. Also known as *on-line medical direction*.

03 *On-Scene*
Immediate orders to an EMS provider by a physician at the scene of the medical emergency who has officially assumed responsibility for the management of the prehospital care of the patient.

04 *Transfer Orders (Patient Specific)*
Written orders by a physician responsible for the medical care of the patient, provided specifically for the patient's transport. The orders must accompany the patient, must be in writing, and must be signed by the responsible physician. Also known as *advanced medical directions.*

05 *DNR Do Not Resuscitate*
Used in respiratory/cardiac arrest situations when resuscitation efforts were withheld due to a valid DNR order.

88 *Not Applicable*
Citation of authorization is Not Applicable or indicated, such as in cases where no medical treatments are provided, or no treatments requiring explicit physician authorization are administered.

99 *Unknown*
Applicable authorization for treatment not recorded or not known by the EMS provider, such as cases where prehospital skills and treatments are applied by an EMS provider based on training and experience, without knowledge of the existence of applicable protocols. This is a default data entry, to be used when none of the other codes apply.

53.

Name of Data Element:	Motor Vehicle Impact
Priority:	Essential
Definition:	Motor Vehicle Impact site during collision
Code:	Numeric entry
Field Length:	10
Field Starting and Ending Position:	267 - 276

Data Items:

01	Head-on	05	Rollover
02	Lateral	06	Rotation
03	Ejection	88	Not Applicable
04	Rear	99	Unknown

Content: This 2-position data element provides important information about the site of collision during a Motor Vehicle Impact, which can be used to predict injury patterns. Data will be of use for corroboration of police reports concerning crashes. Up to **5 (five)** Motor Vehicle Impact sites can be selected.

Technical Comments:

88 *Not Applicable*

This code should be used when the data element "Mechanism of Injury" is not related to a Motor Vehicle.

99 *Unknown*

This code should be used when the data element "Mechanism of Injury" is related to a Motor Vehicle but the Motor Vehicle Impact site cannot be determined.

54.

Name of Data Element:	Safety Equipment
Priority:	Essential
Definition:	Safety equipment in use by patient at time of injury
Code:	Numeric entry
Field Length:	10
Field Starting and Ending Position:	277 - 286

Data Items:

01	None used	07	Helmet
02	Shoulder belt only	08	Eye protection
03	Lap belt only	09	Protective clothing/gear
04	Shoulder and lap belt	10	Personal float device
05	Child safety seat	88	Not Applicable
06	Airbag deployed	99	Unknown

Content: This 2-position data element provides important information about safety device use. Data will be of use for corroboration of police reports concerning crashes. Up to **5 (five)** types of Safety Equipment can be selected.

Technical Comments:

01 *None Used*

This code should be used only if the EMS provider knows that no safety device was employed.

88 *Not Applicable*

This code should be used when safety equipment was not indicated.

99 *Unknown*

This code should be used when the EMS provider has no information about safety device use and cannot obtain such information from the patient or witnesses.

55.

Name of Data Element:	Level of Care Provided
Priority:	Essential
Definition:	Type of care rendered by personnel regardless of level
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	287 - 288
Data Items:	
01 BLS	
02 ALS	
88 Not Applicable	

Content: This 2-position data element provides important information about the Level of Care rendered. Data will be of use for corroboration of police reports concerning crashes.

Technical Comments:

88 *Not Applicable*

This code should be used when neither BLS nor ALS care was rendered to the patient.

56.

Name of Data Element:	Destination Transferred
Priority:	Essential
Definition:	Health Care Facility **OR** Prehospital Agency that received patient from EMS provider submitting this record
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	289 - 290

<table>
<tr><th colspan="4" align="center">Data Items:</th></tr>
<tr><td>01</td><td>Home</td><td>05</td><td>Other EMS responder (air)</td></tr>
<tr><td>02</td><td>Police/jail</td><td>06</td><td>Hospital</td></tr>
<tr><td>03</td><td>Medical Office/clinic</td><td>07</td><td>Morgue</td></tr>
<tr><td>04</td><td>Other EMS responder (ground)</td><td>88</td><td>Not Applicable</td></tr>
</table>

Content: This 2-position data element allows reporting by destination facilities, and allows linking when a patient is transferred between EMS provider agencies.

Technical Comments: This data element is used in conjunction with the data element #58 "Receiving Facility" to indicate the specific Receiving Facility.

   4   Other EMS responder (ground)
When this code is used, the data element #58 "Receiving Facility" should reflect a selection from the EMS Agency Numbers (Appendix D).

   5   Other EMS responder (air)
When this code is used, the data element #58 "Receiving Facility" should reflect a selection from the EMS Agency Numbers (Appendix D).

   6   Hospital
When this code is used, the data element #58 "Receiving Facility" should reflect a selection from the EMS Facility Numbers (Appendix E).

   88   Not Applicable
This code should be used when none of the other codes apply.

57.

Name of Data Element:	Destination Determination
Priority:	Essential
Definition:	Reason a transport destination was selected
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	291 - 292

<table>
<tr><td colspan="4" align="center">**Data Items:**</td></tr>
<tr><td>01</td><td>Closest Facility</td><td>06</td><td>Protocol</td></tr>
<tr><td>02</td><td>Patient/Family Choice</td><td>07</td><td>Specialty Resource Center</td></tr>
<tr><td>03</td><td>Patient Physician Choice</td><td>08</td><td>On-line Medical Direction</td></tr>
<tr><td>04</td><td>Managed Care</td><td>09</td><td>Diversion</td></tr>
<tr><td>05</td><td>Law Enforcement Choice</td><td>77</td><td>Other</td></tr>
<tr><td></td><td></td><td>88</td><td>Not Applicable</td></tr>
</table>

Content: This 2-position data element helps EMS managers to determine whether the choice of destination is appropriate. Items that are defined as patient, physician, or family choice are of interest to determine whether a trauma or referral system is functioning well, or is frequently overridden by non-medical issues. Only **1 (one)** Destination should be specified.

Technical Comments:

        77 *Other*
This code should be used when the patient was transported to a destination not included in the list.

        88 *Not Applicable*
This code should be used when none of the other codes apply.

58.

Name of Data Element:	Receiving Facility
Priority:	Essential
Definition:	Specific Health Care Facility or Prehospital Agency that received patient from EMS provider providing this record
Code:	Numeric entry
Field Length:	5
Field Starting and Ending Position:	293 - 297

<table>
<tr><td align="center">**Data Items:**</td></tr>
<tr><td align="center">{5 digit Facility Number}</td></tr>
<tr><td align="center">99999   Unknown</td></tr>
</table>

Content: This element consists of the unique 5-position Office of EMS assigned Facility Number or EMS Agency Number.

See Appendix D for a complete list of EMS Agency Numbers.
See Appendix E for a complete list of Facility Numbers.

Technical Comments: This data element is used in conjunction with the data element #56 "Destination Transferred" to indicate the specific Receiving Facility.

     9999 *Unknown*
This code should be used when the specific Facility Number or EMS Agency Number is not known.

59.

Name of Data Element:	Clinical Assessment
Priority:	Essential
Definition:	Provider's clinical evaluation which led to the management given to the patient (treatments, medications, procedures)
Code:	Numeric entry
Field Length:	10
Field Starting and Ending Position:	298 - 307

Data Items:

01	Abdominal pain / problems
02	Airway obstruction
03	Allergic reaction
04	Altered level of consciousness
05	Behavioral / psychiatric disorder
06	Cardiac arrest
07	Cardiac rhythm disturbance
08	Chest pain / discomfort
09	Diabetic
10	Electrocution
11	Hyperthermia
12	Hypothermia
13	Hypovolemia / shock
14	Inhalation injury (toxic gas)
15	Obvious death
16	Poisoning / drug ingestion
17	Pregnancy / OB delivery
18	Respiratory arrest
19	Respiratory distress
20	Seizure
21	Smoke inhalation
22	Stings / venomous bites
23	Stroke / CVA
24	Syncope / fainting
25	Traumatic injury
26	Vaginal hemorrhage
27	General Illness
77	Other
99	Unknown

Content: This 2-position data element identifies the **primary** findings of the patient survey that drove the EMS provider to choose a particular plan of therapy and management. Up to **5 (five)** Clinical Assessments can be specified.

It should be noted that this coding system differs from current systems. For instance, many EMS data sets include the entity, Animal Bite. In the uniform data set, such an entry should

be coded in this field as a Traumatic Injury. The site of injury should be indicated in the injury field, showing the type (laceration or puncture) and site of the bite itself. In addition, the Mechanism of Injury should be coded as Bites (E906.x) as discussed under the data element, Mechanism of Injury. For another example, Sexual Assault is coded in this data element in the same manner as a Traumatic Injury, but the Mechanism of Injury would be coded as Assault (E967.x). The reason for using this approach is to avoid overlapping, duplicative codes that are not attached to a general taxonomy such as ICD9. Such codes would become agency specific and would not be flexible enough to permit combining data from different agencies.

Technical Comments: The list provided here is not all-inclusive, but the definitions are described in more detail below.

01 *Abdominal pain / problems (E Code 789.00)*
Includes acute abdomen, painful abdomen, cramps, etc.   Does not include abdominal trauma.

02 *Airway obstruction (E Code 519.80)*
Includes choking, swelling of neck, croup, epiglottitis, foreign body in airway, etc.

03 *Allergic reaction (E Code 995.30)*
Includes reactions to drugs, plants, insects, etc. Category includes hives, urticaria, wheezing and so forth when suspected of being related to allergy.

04 *Altered level of consciousness (E Code 780.09)*
Refers to patients with any alteration of consciousness, including patients who appear to be substance abusers or under the influence of drugs or alcohol.

05 *Behavioral / psychiatric disorder (E Code 312.90)*
Includes all situations in which a behavioral or psychiatric problem was considered the major problem for the EMS provider.

06 *Cardiac arrest (E Code 427.50)*
All instances in which cardiac arrest occurred, and either death was pronounced immediately, or external cardiac massage was instituted.

07 *Cardiac rhythm disturbance (E Code 427.90)*
Includes any rhythm disturbance that was noted on physical examination or with a cardiac monitor, when the rhythm was the major clinical reason for care rendered by the EMS provider.

08 *Chest pain / discomfort (E Code 786.50)*
Includes patients with complaint of chest pain, including pain felt related to heart disease, upset stomach, or muscle pain in the chest wall. If an agency has different protocols for different types of chest pain, then this code should be separated out according to the types of protocols.

09 *Diabetic (E Code 250.90)*
Relates to patients with symptoms relatable to diabetes, generally when there is a history of diabetes in the patient. The major symptom is hypoglycemia, but in circumstances where

diabetes is known to exist, this category can include ketoacidosis, as well as other complications of diabetes.

10 *Electrocution (E Code 994.80)*
Instances of electrocution. Please note that the proper code should be entered in the "Mechanism of Injury" data element.

11 *Hyperthermia (E Code 780.60)*
When hyperthermia is the major clinical assessment driving EMS provider care.

12 *Hypothermia (E Code 780.90)*
Usually relates to environmental hypothermia, such as following submersion in cold water, avalanches, or other environmental exposure situations.

13 *Hypovolemia / shock (E Code 785.59)*
Patients with clinical shock, usually felt to be hypovolemic. All patients considered to have shock by EMS providers should be coded with this code, as it is relatively difficult to identify other less common forms of shock outside the hospital setting.

14 *Inhalation injury (toxic gas) (E Code 987.90)*
Excludes smoke inhalation.

15 *Obvious death (E Code 798.99)*
Patients who were dead at the scene and no therapies were undertaken.

16 *Poisoning / drug ingestion (E Code 977.90)*
Includes drug ingestions that are inappropriate drugs or overdoses, as well as poisonings from chemicals. Toxic gases should be coded as "14 Inhalation injury". Venomous bites or stings should be coded as "22 Stings".

17 *Pregnancy / OB delivery (E Code 659.90)*
Includes all aspects of obstetric care rendered in the prehospital setting. This ICD code is the closest approximation for such a general category.

18 *Respiratory arrest (E Code 799.10)*
Instances in which the patient stops breathing. These patients always require ventilatory support on at least a temporary basis.

19 *Respiratory distress (E Code 786.09)*
Includes patients with respiratory distress who continue to have spontaneous breathing and never suffer respiratory arrest. These patients may require ventilatory support.

20 *Seizure (E Code 780.30)*
Includes major and minor motor seizures.

21 *Smoke inhalation (E Code 987.90)*
Smoke inhalation encountered in conflagration setting. The "Mechanism of Injury" data element should include the proper code.

22 *Stings / venomous bites (E Code 989.50)*
Includes poisonous snakes, insects, bees, wasps, ants, etc. If an allergic reaction occurs and predominates the clinical situation, then the clinical assessment should be coded as an allergic reaction rather than a sting or bite, since the code in the "Mechanism of Injury" data element will further clarify the cause.

23 *Stroke / CVA (E Code 436.00)*
Cardiovascular accidents, strokes, TIA.

24 *Syncope / fainting (E Code 780.20)*
Fainting is the major clinical assessment, even though the patient may be fully awake at the time of EMS evaluation.

25 *Traumatic injury (E Code 959.90)*
All patients in whom traumatic injury is the major reason for the EMS action. Includes injuries such as animal bites. The site of injury should be indicated in the "Injury Description" field described earlier in this dictionary, showing the type (laceration or puncture) and site of the bite itself. In addition, the "Mechanism of Injury" should be coded as "15 Bites" as discussed under the data element "Mechanism of Injury". For another example, Sexual Assault is coded in this data element in the same manner as a Traumatic Injury, but the "Mechanism of Injury" would be coded as "25 Assault".

26 *Vaginal hemorrhage (E Code 623.80)*
Refers to abnormal vaginal bleeding in sufficient amount to have driven the EMS response. When pregnancy is involved, vaginal hemorrhage should be coded when the hemorrhage itself was the major concern to the EMS provider. When childbirth or other obstetric issues are more important, then this data element should be coded as "17 Pregnancy/OB delivery".

27 *General Illness*
Refers to non-specific complaints of sickness.

77 *Other*
This code should be used when none of the codes listed can be applied; however, there is enough information for a clinical assessment to be made by the EMS provider. This should be a very rarely used code.

99 *Unknown*
This code should be used when there is not enough information on the run sheet to determine the clinical assessment of the EMS provider. This should be a very rarely used code.

60.

Name of Data Element:	Units Responding
Priority:	Desirable
Definition:	Number of EMS permitted vehicles that respond to an EMS Incident
Code:	Numeric entry
Field Length:	1
Field Starting and Ending Position:	308 - 308
Data Items: {1 digit Units Responding}	

Content: The 1-position data element that indicates the number of EMS permitted vehicles that respond to an EMS Incident.

Technical Comments: This data element is used to track entry of multiple vehicles on the same PPCR form thus reducing the need to complete separate PPCR forms for each additional vehicle. Each vehicle that responds to an EMS Incident should be included in this number.

61.

Name of Data Element:	Type of Call
Priority:	Desirable
Definition:	Type of event EMS provider encounters at the scene
Code:	Numeric entry
Field Length:	2
Field Starting and Ending Position:	309 – 310
Data Items: {2 digit Type of Call} 01　Accident/Industrial/Construction　07　Mutual Aid 02　Accident/MVC　08　Public Service 03　Assault　09　Standby 04　Fire　10　Transport/Routine 05　Injury Not Listed　77　Other 06　Medical Emergency	

Content: This 2-position data element describes the type of event that the EMS provider encounters at the scene of the EMS Incident.

Technical Comments:

　　77　*Other*
This code should be used when an event is encountered that is not included in the list.

62.

Name of Data Element:	Layout Number
Priority:	Essential
Definition:	Identifies file layout for approved vendors
Code:	Alpha/numeric entry
Field Length:	2
Field Starting and Ending Position:	311 – 312
Data Items: {2 digit Layout Number}	

Content: This 2-position data element identifies the file layout used to format the data.

Technical Comments: Approved third party vendors should fill this field with **"9B"** to designate to the Office of EMS which file layout is being used. The Office of EMS also uses this field to identify the version number of its software.